STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

PLEASE PRINT

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APR 1 5 2019

1 Name of Labbuistics Flat F	J G KOIB		AFR 13 2013
I. Name of Lobbyist(s) ELLEN G. FOLB II. Name of lobbyist's partnership, firm or corporation, if any:			NEW HAMPSHIRE DEPARTMENT OF STATE
> F		•	
(Name of partnership.	firm or corporation)		
	-		
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
()(Telephone)	()	e-mail	
(Telephone)	(Far	x)	
III. This statement covers: (Choose of reportable expense transactions whi			u may file a separate report for
All reportable transactions occurri	ng in the months prior to	the reporting date relative	to the following client:
CORNERSTONE AC		. 0	V
(Full Name of C	Client as it appears on the L	obbyist Registration Form)	
OR		,	
All reportable transactions by the lounrelated to any particular client.	obbyist (including the lo	bbyist's family), or the lobb	ying firm listed below which are
IV. Date of Report April 24, 201	9 🔀	July 31, 2019	
Reports cover: activity from date of re	•	activity from 4/1/19 to 6/3	
October 30, 2 activity from 7/1/		January 29, 2020 activity from 10/1/19 to 1	
V. There have been no fees received of this box is checked, complete just the Concord, NH 03301.	ved and no reportablis form and submit it to	le transactions made sin the Secretary of State's Offic	ce the last report. Ce, State House, Room 204,
VI. Check if additional reports are a	ittached:		
If you have received fees or made	expenditures, you must	file Addendum A- Fees ar	nd Expenses
☐ If you have paid an honorarium or Expense Reimbursement	reimbursed expenses, y	ou must file Addendum B-	- Report of Honorariums or
☐ If you, your firm, or your family h	as made political contri	butions, you must file Adde	endum C- Political Contributions
Sworn Statement/Affirmation by Lo I have read RSA 15, RSA 15-B, RSA and complete to the best of my knowled (Signature of lobbyis)	14-C and RSA 664 and	hereby swear or affirm that	the foregoing information is true (Date)
ELLEN G. KOLB (Print Name of Johnvist)			

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

1. Name of Lobbyist(s) ELLEN G. KOLB	
1. Name of Lobbyist(s) <u>CLLEN</u> G. ROLD	
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation)	_
III. Name of Client CORNERSTONE ACTION	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greened by any expenses:	t relations, or public relations services
a) Total of all fees received in this reporting period	a)\$_3660.75
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$ ear)
c) Total of all fees received to date (Add lines a and b)	c)\$ <u>3660.75</u>
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid xpenses; (b) the aggregate total of all le: meals purchased during a business ss than \$10 that is given to the personed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of a trans \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	s
	sØ
	s Ø
	s Ø
<u></u>	s
	\$
	·
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	n that the foregoing information
Alon atoll	4/14/19
(Signature of lobbyist)	(Date)
ELLEN G. KOLB	
(Print Name of lobbyist)	